Ī]Fa	iled 🗌	Closed IHH	State of Maine H	lea	lth	ı İr	ısı	pectio	n Report	t		Pa	ge 1 o	f 6			
				Critical Violations								Date	2	/6/201	9			
			me	As Authorized by 22 MRSA 👂 2496		Non-Critical Violations							Time	_	:10 P			
CANTON WOK					 			Food Protection Manager				Υ	Time		:00 P	<u> </u>		
License Expiry Date/EST. ID# Address 6/12/2019 / 7893 920 LISBON ST						Cit	-	.		Zip Code			Telep					
								LEWISTON Purpose of Ingression			04240-612 License Post		——	777-300 sk Categ				
License Type Owner Name MUN - EATING PLACE DONGS GARDEN INC													Ki	sk Caley	OI y			
IVI	OIA	- EATING	-		Regular				IDLIC HE									
FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS																		
Circle designated compliance status (IN, OUT, N/O, N/A) for each numbered item IN=in compliance OUT=not in compliance N/O=not observed N/A=not applicable Mark"X" in appropriate box for COS and/or R COS=corrected on-site during inspection R=repeat violation																		
· · · · · · · · · · · · · · · · · · ·								0				UII	11-10	peat viole		1_		
Compliance Status Supervision							Compliance Status cos Potentially Hazardous Food Time/Temperature											
			PIC present, demonstra	•	Т	П	16		IN Proper cooking time & temperatures					Т				
Ľ	performs duties				_	Ц	17		OUT Proper reheating procedures for hot hold			ding)	\				
2		IN	Employee Health Management awareness; policy present				18		IN	Proper cooling			es			\bot		
3		IN	Proper use of reporting			19 20		IN	Proper hot hold						+			
			Good Hyg			21		OUT	Proper cold holding temperatures Proper date marking & disposition									
<u>4</u> 5		IN IN	Proper eating, tasting, No discharge from eyes		Н	22		IN	Time as a public health control: procedures & record									
Ť		IIN	Preventing Conta					•	Consumer Advisory									
6		OUT	Hands clean & properly	Т	П				Consumer advi		d for ra	aw or		Т				
П			No bare hand contact with RTE foods or approved			П	23		IN	undercooked fo								
7		IN	alternate method properly followed						Highly Susc		ptible Popula	tions						
8		OUT Adequate handwashing facilities supplied & accessible				х	24		IN		ods used; prohibited food			ds not				
			Approv	red Source			Н			offered	Chemical							
9		IN	Food obtained from app	proved source		Ш	25		IN	Food additives		propo	rly uso	4		$\overline{}$		
10		IN	Food received at proper temperature				26		OUT	Toxic substance			_		ed ;	,		
11		IN	Food in good condition, safe, & unadulterated				Н			onformance with				eu œ use	, ,	`		
Required records available: shellstock tags parasite destruction									1				00000	т				
Protection from Contamination							27							00000,				
13 OUT Food separated & protected				X	П	_			<u> </u>									
14					П			k Factors	are improper practions of f	•								
15 IN Proper disposition of returned, previously served,								•										
reconditioned, & unsafe food								Interventions are control measures to prevent foodborne illne										
				GOOD I														
			Good Retail Practices are	preventative measures to control the	additio	on of	patho	gen	s, chemicals	, and physical obje	cts into foods.							
Mark "X" in box if numbered item is not in compliance Mark "X" in appropriate box for COS and/or R COS=corrected on-site during inspection R=repeat violation										on								
															co	S R		
Safe Food and Water										Proper Us	e of Utensils							
28 IN Pasteurized eggs used where required							41	Х	In-use uter	nsils: properly sto	ored				х	: x		
29	-					Ш	42	-	Utensils, e	Utensils, equipment, & linens: properly stored, dried, & handled								
30	30 N Variance obtained for specialized processing methods					Щ	-	IN		& single-service	articles: pro	perly s	tored 8	k used		\bot		
Food Temperature Control							44	IN	Gloves use	ed properly						Ш		
31 X Proper cooling methods used; adequate equipment for									F 0	Utensils, Equip								
temperature control 32 IN Plant food properly cooked for hot holding					+	Н	45	X		n-food contact su esigned, constru		abie,						
33					+	Н	46	IN		erly designed, constructed, & used ewashing facilities: installed, maintained, & used; test strips								
33 N Approved thawing methods used 34 X Thermometers provided and accurate						Н	47	-		contact surfaces		illeu, e	x useu,	test stri)5	+		
-	^	THETHIOTHE	Food Identificati				Physical Facilities											
35 N Food properly labeled; original container							48	IN	Hot & cold	water available;		essure			$\overline{}$	Т		
			Prevention of Food Conf		_		49	IN		nstalled; proper								
36	IN	Insects, ro	ts, rodents, & animals not present				50	IN		e & waste water properly disposed								
37 X Contamination prevented during food preparation, storage & display						П	51	Х		ities: properly co			, & cle	aned	\neg	T		
38 X Personal cleanliness							52	IN		k refuse properly		-						
39 X Wiping cloths: properly used & stored							53	Х	Physical fa	acilities installed,	maintained,	& clear	n					
40 IN Washing fruits & vegetables							54	IN	Adequate	ventilation & ligh	ting; designat	ed are	eas use	d				
77M RESCO DONG																		
Per	Person in Charge (Signature) Date: 2/6/2019																	
Health Inspector (Signature)											_							
	LOUIS LACHANCE								Follow-	-up: 🔽 YES	NO Da	ate of F	-ollow-	up: 2/8/2	2019			

	State of	Maine	Maine Health Inspection Report								
Establishment Name CANTON WOK				As Authorized b	Date 2/6/2019						
icense Expiry Date/EST. ID# /12/2019 / 7893	т	City / State Zip Code LEWISTON / ME 04240-6128									
		empera	ture	Observati							
Location	Temperature				Notes						
Egg roll	133*	Plated for s	sevice,	instructed to reheat	to 165*						
Hot water	108*	3 bay sink									
Chicken fingers	Chicken fingers 47* Cold holding, discarded										
Water	Water 66* handwash sink										
Fried rice	144*	Hot holding)								
Cut cabbage	42*	Wok line re	efrigera	tor unit							
Garlic and oil	34*	basement	refriger	ator							
Cooked chicken	40*	Single doo	r coole								
Cooked chicken wings	53*	Cooling pro	ocess,	refrigerator unit							
		<u> </u>									

Person in Charge (Signature)

BBQ Pork

Health Inspector (Signature) LOUIS LACHANCE XUNGTHG DONG JSG

Cooling process, 3 hours

63*

Date: 2/6/2019

State of Maine Health Inspection Report

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Date

Establishment Name

CANTON WOK

License Expiry Date/EST. ID# 6/12/2019 / 7893

Address 920 LISBON ST City / State LEWISTON

ME

Zip Code 04240-6128

Observations and Corrective Actions

Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 and 8-406.11 of the Food Code

1: 2-102.11.(A).(B): C: The person in charge could not demonstrate required knowledge, either by complying with this code and no critical violations during this inspection or not having a current CFPM certificate.

INSPECTOR NOTES: CFPM could not answer common questions associated with food safety or the big 5 foodborne illnesses.

6: 2-301.12: C: Food employees are not following proper hand cleaning procedures.

INSPECTOR NOTES: Foodservice personel not washing hands inbetween tasks as required.

8: 5-202.12: N: Hand washing facility not properly equipped/installed with hot water of at least 100 F.

INSPECTOR NOTES: Handwash sink does not have supply of hot water. Hire licensed plumber to repares neccassary to achieve 100* or more water.

8: 5-205.11.(B): N: Hand washing facility being used for other than hand washing.

INSPECTOR NOTES: **REPEAT** Handwash sink has sauce pot in it. Handwash sink only used to wash hands.

13: 3-302.11.(A).(2): C: Different types of Raw animal foods are not stored in a way to prevent cross contamination with each other during storage, preparation, holding, or display.

INSPECTOR NOTES: Raw chicken stored over raw beef. Raw chicken must be stored below beef. *COS

14: 4-601.11.(A): C: Equipment food-contact surfaces and utensils are not clean to sight and touch.

INSPECTOR NOTES: BBQ pork roaster has large accumilation of old food. Wok utensils in direct contact with unsanitized surfaces.

17: 3-403.11.(A): C: PHF not properly reheated to 165 F for 15 seconds for hot holding.

INSPECTOR NOTES: Eggroll plated for service reheated to 133 degrees. Egg roll must be reheated to a minimum of 165*. *COS

20: 3-501.16.(A).(2): C: PHF not maintained at 41 F or less.

INSPECTOR NOTES: Chicken fingers in refrigerator elevated in temperature. PHF's must be kept at 41* or below

21: 3-501.17.(D): C: Date marking system used at the Eating Establishment does not meet the criteria list in code.

INSPECTOR NOTES: No prepared foods held for storage are date marked. Label all prepared foods in storage with prepared date and discard date.

26: 7-204.11: C: Chemical SANITIZERS and other chemical antimicrobials applied to FOOD-CONTACT Surfaces do not meet the requirements specified in 40 CFR 180.940 or 40 CFR 180.2020 sanitizing solutions.

INSPECTOR NOTES: Bleach used at establishment not germicidical. Purchase approved sanitizer that is listed as killing bacteria and germs. *COS

31: 3-501.15: N: Cooked foods improperly cooled.

INSPECTOR NOTES: Cooked foods are being cooled in deep plastic containers. Use shallow pans to cool.

Person in Charge (Signature)

Health Inspector (Signature) LOUIS LACHANCE



Date: 2/6/2019

State of Maine Health Inspection Report

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Date 2/6/2019

Establishment Name

CANTON WOK

License Expiry Date/EST. ID# 6/12/2019 / 7893

Address 920 LISBON ST

City / State LEWISTON

ME

Zip Code 04240-6128

Observations and Corrective Actions

Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 and 8-406.11 of the Food Code

34: 4-302.12.(A): N: Inadequate number of food temperature measuring devices provided.

INSPECTOR NOTES: Working Food probe thermometer not found. Purchase multiple thermometers to ensure proper cooking.

37: 3-305.11: N: Food not protected from contamination during storage.

INSPECTOR NOTES: Uncovered containers of cooked foods stacked on top of each other posing a problem of cross contamination.

38: 2-402.11: N: Food Employees not wearing effective hair restraints.

INSPECTOR NOTES: PIC not wearing hair restraints. Wear cap or hairnet to protect food from hair.

39: 3-304.14.(B).(1): N: Wiping cloths used for wiping counters and other equipment surfaces not held between uses in a chemical sanitizer.

INSPECTOR NOTES: Dirty wiping cloths found throughout establishment and on working surfaces. Cloths must be held in chemical sanitizer.

41: 3-304.12: N: Improper between-use storage of in-use utensils.

INSPECTOR NOTES: In use utensils stored in water at 70*. In use utensils must remain in water at 135* or more or on a sanitized surface. *COS

45: 4-501.11: N: Equipment in disrepair.

INSPECTOR NOTES: Multiple door handles to refrigeration units are broken.

47: 4-602.13: N: Non-food contact surfaces are not cleaned at a frequency necessary to preclude accumulation of soil residues.

INSPECTOR NOTES: All shelving and items on shelves, above food, are dirty. All refrigeration surfaces in need of cleaning and sanitizing. Clean more often

51: 5-501.17: N: Covered receptacle not provided. (Female use)

INSPECTOR NOTES: No covered receptacle in employee restroom. Purchase trash receptacle that has a cover.

53: 6-501.11: N: The physical facilities are in disrepair.

INSPECTOR NOTES: Sheet metal counter used in meat cutting room is broken and filled with old food. Resurface equipment to be smooth and easily cleanable.

Person in Charge (Signature)

Health Inspector (Signature) LOUIS LACHANCE



Date: 2/6/2019

State of Maine Health Inspection Report Page 5 of 6 2/6/2019 Date **Establishment Name CANTON WOK** License Expiry Date/EST. ID# **Address** Zip Code City / State 6/12/2019 /7893 920 LISBON ST LEWISTON ME 04240-6128

Inspection Notes

Certified Food Protection Manager: Zing Dengue Dong exp. 4/8/20

Unless directed otherwise, all Eating Establishments are required to submit a copy of their Certified Food Protection Manager (CFPM) certificate. A CFPM must be hired at the time of a new eating establishment opening or within 60 days of when a CFPM leaves employment. For a list of CFPM courses and trainers go to

http://www.maine.gov/healthinspection/training.htm

Please provide a copy of this certification(s) to Carol Gott, Health Inspection Program, 286 Water St. 3rd Floor, Augusta, ME 04333, carol.gott@maine.gov or faxing to 207-287-3165.

Please include the name of your establishment and the establishment ID# with your certification(s).

Employee Health Policy:

The Health Inspection Program has implemented an educational public health initiative on Employee Health on March 1, 2017. The policy handouts will be provided to you by your inspector and reviewed during inspection for compliance. They are also available on the Program's website: http://www.maine.gov/healthinspection

2013 Maine Food Code Adoption:

The Maine Food Code was adopted in October of 2013. Please refer to our website for a copy, http://www.maine.gov/healthinspection. Following are a few of the major changes: * No Bare Hand Contact with Ready-To-Eat Food. * Establishments must have clean-up procedures for employees to follow following vomiting and diarrheal events. * Date marking of Ready-to-eat potentially hazardous foods.

Violation Correction Timeframe:

Critical violations should be corrected on site, but in any event, within 10 days. The licensee must contact Louis Lachance when the critical violation has been addressed at 207-513-3125 extension 3224 or at llachance@lewistonmaine.gov. Non-critical violations must be corrected within 30 days. Failure to satisfactorily correct these violations before the follow-up inspection may result in enforcement proceedings by the Department to include fines and penalties. License renewals can be denied if violations are not corrected within the noted timeframes.

C= Critical violation and NC= Non-critical violation:

"Critical violation" means a provision of the Food Code that, if in non-compliance, is more likely than other violations to contribute to food contamination, illness or environmental health hazard.

Additional Inspection Fee:

License fees provide for two inspections per year. When additional inspections are required, the Department may charge an additional \$100 fee to cover the costs of each additional inspection or visit.

Document Retention/Posting:

Person in Charge (Signature)

Health Inspector (Signature)

LOUIS LACHANCE

Date: 2/6/2019

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^{**}Immenent Health Hazard issued. Will reinspect 2/8/19

^{**}Owner was asked if he needed an interpreter. He has requested interpreter for Mandarin Chinese.

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Establishment Name					D <u>ate</u>	2/6/2019
CANTON WOK						
License Expiry Date/EST. ID# 6/12/2019 / 7893	Address 920 LISBON ST	City / State LEWISTON	ME	Zip Code 04240-6128		

Inspection Notes

Pursuant to the Maine Food Code, the establishment's current license must be displayed. In addition, a sign or placard must be posted in a conspicuous area notifying consumers that a copy of the most recent inspection report is available upon request. CFPM certificates must be posted in a conspicuous area and must be available to the Department upon request.

Person in Charge (Signature)

Health Inspector (Signature)
LOUIS LACHANCE



Date: 2/6/2019

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